# Summary of Financial Assistance

#### **General Financial Assistance Policy**

Under our facility's Financial Assistance Policy, we provide financial assistance for emergency and other medically necessary care on a sliding scale discount from our normal charges if the responsible party does not otherwise have the ability to pay for services rendered at Mitchell County Hospital Health Systems (MCHHS). All uninsured applicants will be screened for Medicaid coverage and must cooperate with our Social Services to be eligible for financial assistance under our policy. If you are eligible, you will receive free or other discounted assistance according to the following sliding scale.

Income as Percent of Federal Poverty Guideline	Percent of Assistance Discount
0 - 125%	100%
125% - 175%	50%

#### **Emergency Medical Care**

MCHHS will perform a medical screen on all patients who come to our emergency room and will treat the emergency medical condition of patients in non-discriminatory manner to anyone, regardless of their ability to pay, insurance status, national origin, race, creed, or color as stated in the Emergency Medical Treatment and Labor Act (EMTALA).

### Charges will not exceed amounts generally billed to Medicare

If you have no insurance coverage and receive an award of financial assistance under our Policy and your award does not cover 100% of our charges for the service, you will not be charged more for emergency or other medically necessary care than the amount we generally bill patients having insurance under Medicare.

# How to obtain copies of our Financial Assistance Policy

You may obtain a copy of our Policy and the Financial Assistance Application Form:

- on the MCHHS website at www.mchks.com.
- in our admission packet
- in our emergency department
- at Hospital registration area
- In addition, if you provide your mailing address to a patient account representative, we
  will mail you a copy of our Financial Assistance Policy and Application Form free of
  charge.

For information and assistance regarding MCHHS's Financial Assistance Policy, contact Janelle Gasper, Patient Accounts Clerk, at 785-738-9502 or jgasper@mchks.com.